

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF NY

AKO K. Burrell



VS

Complaint

Docket #: _____

Joseph North

Defendants

I. PLAINTIFFS COMPLAINT

Plaintiff AKO K. BURRELL, Pro se, for their Complaint
State as follows:

II. Parties, Jurisdiction & Venue

2. Plaintiff was confined in the New York State
Department of Corrections and Community Supervision
(hereinafter DOCCS) Attica, 639 Exchange

from May, 2018 - February 20, 2020. Plaintiff is currently
confined in Upstate CTF, 309 Barehill Road, Malone, NY
12953.

3. Plaintiff AKO K. BURRELL is and was at all times
mentioned herein an adult citizen of the United
States and a resident of the State of New York.

(Page One)

- 4.) Defendant (S) Joseph North, was at all times relevant, the Superintendent of ACF, and responsible for the Plaintiff's welfare.
- 5.) Defendant White, was a Captain at all times relevant, to the complaint and was responsible for the Plaintiff's welfare.
- 6.) Defendant Paddy was at all times relevant, a Correctional Officer, at ACF, and was responsible for Plaintiff's welfare.
- 7.) Defendant Fox, was at all times relevant a Sergeant, at ACF, & was responsible for the welfare of Plaintiff.
- Defendant Spier was at all times relevant a Sergeant at ACF & was responsible for the welfare of Plaintiff.
- 8.) Defendant Lee, was at all times relevant, a Correctional Officer at ACF, and was responsible for Plaintiff's welfare.
- Defendant Mijang, was at all times relevant, a Correctional Officer at ACF, & was responsible for Plaintiff's welfare.
- 9.) Defendant Ellis, was at all times relevant, a Correctional Officer at ACF, & was responsible for the welfare of Plaintiff.
- 10.) Defendant Sykes, was at all times relevant, a Correctional Officer at ACF, & was responsible for the welfare of Plaintiff.
- 11.) Defendant Hodges, was at all times relevant, a Captain at ACF, and was responsible for the welfare of Plaintiff.
- 12.) Defendant McCullar was at all times relevant, a Vocational Instructor, at ACF, and was responsible for the welfare of Plaintiff.

(Page Two)

III. Previous Lawsuits By Plaintiff

13.) Plaintiff has filed other lawsuits dealing with the same facts involved in this action.

14.) A TORT under New York State Court of Claims: Unlawful Confinement; Assault & Battery. The Parties to the previous lawsuit(s) were Plaintiff AKO K. BURELL and Defendants White, Noeth, McCulloch, Hodges, Dezdek, Ridden, mejury, Cee SYSOGLAS, FOX in the State of New York Court Claims, Docket Numbers 134018 & 134109, under Richard Sise. The case is still pending trial. The lawsuit was filed on January 14, 2020, / November 22, 2019, & December 09, 2019. (See Exhibit A)

IV. Exhaustion of Administrative Remedies

15.) I used the Prisoner grievance Procedure in this institution to try to solve my problem on October, 2019. I presented the facts relating to my complaint in the State Prisoner Grievance Procedure got denied. (See Exhibit C) BTD.

V. Statement of Claim

Plaintiff recaps and incorporate by reference Paragraphs 1 - 16 herein.
(Page Three)

17.) At all relevant times herein, defendants were "Persons" for the purposes of 42 USC Section 1983 and acted under color of law to deprive Plaintiff of his Constitutional rights, as set forth more fully below.

VI. Statement of Facts

18.) On or about September 27, 2019, Plaintiff was admitted to SHU. Upon admission, Plaintiff requested a Phone Call, Pursuant to Correction Law 137(9). Defendant Fox, denied Plaintiff Phone Call(s). On or about November 08, 2019, Plaintiff got the admission Call, he was entitled to, within 24 hours of SHU admission.

19.) Defendant McCulloch, Conducted a Tier III Disciplinary Hearing. On or about October 18, 2019. Defendant Delegate to Conduct a misbehavior report (herein after MBR), by Defendant Baker (SGF). For Docs Charges: 107.11; 106.10; 112.20; 112.21; & 107.20. This hearing was conducted outside the scope of Dir. 4930 of Title Seven 7 of New York Codes, Rules, & Regulations (herein after NYCRR 7), causing jurisdictional defects, violating Plaintiff Due-Process right of NYS Constitution Article 6; I.

20.) Plaintiff requested for inmate Pressley to testify, due to the relevancy of being mentioned in the report. Which was denied. Pressley would have corroborated allegations of assaulting him or series them.

(Page Four)

21.) Defendant Sgt. BAKE MBR, fabricated allegations, Plaintiff possessed a weapon, & was making slashing motions, at the head of Pressley, which resulted in a 4" inch laceration on Pressley, chin area, in the C-block ACF, rec yard, on or about September 19, 2019.

22.) Defendant McCulloch denied Pressley, as his testimony would be "redundant"; McCulloch then, called for defendant Baker to testify, & he wrote the report, Plaintiff objected as Baker writing the report, & testifying as "redundant"; Baker reiterated the report. (See Exhibit E)

23.) Defendant McCulloch, conducted the hearing and rendered a guilty disposition for all charges and imposed the following sanctions: 120 Days SHU; 120 Days loss of PKGS; 120 Days loss of commissary; & 120 Days loss of ~~things~~ phones.

24.) On or about Defendant Conducted a Tier II
hearing, and found Plaintiff guilty of charges: 107.10; 106.10; 112.20; & 112.21, a 30 Day Keeplock (hereinafter KL) was issued. On or about October 30, 2019, a Tier II hearing was held for charges of 104.13, 107.10 & 107.20, a 70 Day KL sanction was imposed.

(Page Five)

25.) On or about October 24, 2019, James O'Horman Deputy Commissioner of DOCS, reversed McCulloch guilty disposition, and expunged the MBR from Plaintiff record, based off the denial of Pressley exculpatory testimony. (See Exhibit E)

26.) On or about October 22, 2019, at approximately 4:00 PM Defendant Correction Officer Pezdek at ACF to Plaintiff to "let me see that big black cock, I see your bugle, and your Docketing". Lipsyncing the gesture, while licking his lips seductively at Plaintiff.

27.) Plaintiff was housed in the SHU of ACF, in the Reception Building fourteen cell of the C-East Unit. Plaintiff was inside his cell when Pezdek made this request. Plaintiff asked about missing laundry and requested for Pezdek to stop sexually harassing him.

28.) Pezdek became irate and stated "You're going to get yours, come out for your shower I done you, I'm going to see that cock right in the shower, thru the vestibule?"

29.) Reverend Tomlinson, of ACF, was conducting a tour & speaking with prisoners. Plaintiff stopped Rev. Tomlinson & informed him about Defendant Pezdek sexually exploits. He wrote my name down & stated "I'll let the SGT know, be safe?"

(Page Six)

30) Plaintiff requested, for the Sgt. to substitute Perdek for his Shower escort, as well, for fear of his safety. Perdek has a reputation of assaulting Prisoners during Shower escorts, due to vulnerability of restraints. Plaintiff was then brought out for the Shower, Defendant Perdek began to Pat Risk him, and grope his Penis and handle his testicles, and squeezed his buttocks.

31.) Plaintiff immediately felt ashamed, embarrassed, humiliated, Plaintiff is a hetero-sexual, so these acts were violating him in his essence, Plaintiff entered the Shower and Defendant SKOCZYLAS issued a two(2) minute warning to Plaintiff (that the Shower ends in 2 minutes). Perdek stood outside the Shower and watched Plaintiff exit the Shower and dry his body off with a towel, groping his Penis licking his lips. Plaintiff told Perdek to move away from his line of vision, and excuse his nakedness, while he dried off his body off with a towel.

32.) Plaintiff was then escorted back to his Cell, by Perdek and SKOCZYLAS, and notice his religious Padant was not missing, rushing to stop Perdek assault, and expressed fear of it being stolen. Perdek and SKOCZYLAS slammed Plaintiff into the Wall of the C-East linear tier forcefully causing injury to Plaintiff left ear, and groped by his anus again by Perdek.

(page seven)

33.) Plaintiff was physically examined by Defendant Sgt Synder and a John Doe nurse. Plaintiff informed Synder of the request via Alex Tomlinson to prevent Pezdek assaulting Plaintiff, by substituting his officer esky and the Premeditated Attack.

34.) Synder replied "Yeah, I was coming to speak to you about that, listen, drop the PREA on Pezdek with Tomlinson, and tell him its resolved and mistaken (exaggerated even), no harm no foul or your going on shower deprivation thinking my threat is idle." Synder placed Plaintiff on Shower deprivation from October 22, 2019 - October 31, 2019.

35.) Synder ordered to SKOCZYLAS "Listen your going to have to write this fucker up, because Pezdek can't for obvious reasons, he reported a PREA on him, but not you, so it won't look like a reprisal, the staff put a violent conduct on there, to bump it to a Tier III and I'll do the unusual incident report (see exhibit A)

36.) On or about October 30, 2019, a Tier hearing was conducted by Defendant Hodges, a delegate of IVaeter, to conduct a Superintendent Hearing, in the matter of the report Defendant SKOCZYLAS wrote, under the direction of Synder, in retaliation of a PREA filed against Pezdek October 22, 2019. The charges were as follows:
106.10; 106.11; B 104.13.

(Page Eight)

43.) Plaintiff had his religious Pendant Stolen due to Pezzes distracting him to the emotional and distress leaving it in the store. Plaintiff ordered a replacement from Sunshine Jewelry. Defendants Noeth, Fox, and White denied Plaintiff a replacement Pendant.

44.) Plaintiff received a kosher diet the tenure of SHV and KL, 46 days in SHV. The apple sauce Plaintiff received was expired and informed ~~Defendant~~ Ellis to provide me a substitute, everytime, and he refused to contact Defendant John Doe Food Service Administrator to stop providing me with expired apple sauce.

V. Exhaustion of Administrative Remedies

44.1 Plaintiff Exhausted all of his Administrative Remedies in this matter (See Exhibit); Plaintiff showed readiness for trial on these matters in lower Court as well (See Exhibit B-1), and have not received a response.

Plaintiff suffered rectum split, neck strained injury, 200 stitches on LIP, (Pezzes). Hodges' 11/11 hearing was expunged and reversed. (See Exhibit I).

(Page Nine)

4(6.) Plaintiff notice his Kasher meal was missing and his long sleeve shirt and by his Kasher meal was his vent, there was a white protruding item from the vent. I recovered this item and gave it to a John Doe civilian conducting religious interviews, who returned the weapon, and told Plaintiff "flush it, I'm going to report this now". (See Exhibit H)

4(7.) On or about November 01, 2020, Defendant(s) Roberts, Lee, and Fox approached Plaintiff cell. They stated they were there to conduct a cell search of Plaintiff. While they conducted this search Roberts yelled "I can't find it, where it is?" Defendant Fox and Lee assumed it fell into the inner-linear of the catwalk, and went there to retrieve it, they yelled to Roberts "Nothing here", Lee stated "I put the shit right here what fuck?" Roberts and Fox said "we got to get this fucker", Noeth said he brought this OST down or PREA, and he got Baker and McCulloch ticket reversed!!

4(8.) On or about November 05, 2020 Plaintiff sought to attend the shower yard, and Defendant(s) Fox, Lee, Roberts, & Shelby, ordered Plaintiff to get up at 5:30 am. Fox stated "No, Noeth said it was was going to keep his loss from doing this rec shit". Plaintiff was placed in the rec yard, ordered to remove his socks, and shoes, his hat and was given shower shoes by Roberts. Plaintiff remained in the rec yard from 5:30 am, until 12:30 PM, freezing, causing frost bites.

(Page Ten)

40) Hodges, found Plaintiff guilty on the record, and imposed the following Sanctions; SHU to Commenced January 23, 2020 - May 08, 2020.; Loss of Packages March 26, 2020 - May 10, 2020; March 26, 2020 - May 10, 2020. Plaintiff made an objection to the erroneous Calculation of these Sanctions, and Hodges stated "The HLO has twenty-four (24) hours after Conclusion of the hearing to render the disposition. Therefore, you will receive an amended disposition in the next 24 hours, have a nice day." Plaintiff never received the witness interview notice form.

41.) Plaintiff never received the Amended disposition, Plaintiff filed an appeal to DOCS Commissioner Amucci Pursuant to 7 NYCRR Div. 4932. On or about January 09, 2020. Mr. D. Venetozzi, Director SHU, reviewed & reversed Defendant Hodges disposition and expunged all references from Plaintiff's institutional record.

42.) On or about October 30, 2019, Plaintiff exited his cell 14 of the SHU to attend a hearing while at this hearing Defendant Lee entered Plaintiff cell without any authorization from a Sgt., Deputy of Security or any legal Penological legitimate interest or justification. Lee placed a Sharpend Facility tooth brush that was altered into a Dangerous Instrument, under the Penal law of New York defining it was an "ICE-PICK" (See Exhibit H)

(Page eleven)

37.) Hodges Conducted the hearing Arbitrarily, with malicious intent to Continue Plaintiff to SHU. Hodges Stated "Listen, you done PISSED Natch off, he told me to do this hearing, to get you at least 45 Days SHU, to get you the fuck out our hair with this PREA shit, that makes you eligible for transfer out of here, so I'm helping you out, but your disposition done, I gave you 45 exactly, I couldn't hammered you, so I can get the fuck out this hot ass room?"

38.) Plaintiff received a copy of this disposition, I then informed Hodges, I received an ExPurgement over my previous SHU sanctions on October 25, 2019. Hodges Stated well this is what reflects. I produced the exPurgement from DOCS SHU Director SMC 17. Vernettozi. Hodges Stated "Oh, shit well it's happened, so fuck it!"

39.) Plaintiff viewed the video of incident of October 22, 2019, at 4:00 PM with Pezdek and Sykocias. The video depicted Pezdek approached Plaintiff cell with laundry, and the exchange previously mentioned Rev. Tomlinson, is seen walking, and Plaintiff is reporting the PREA, and requesting a substitute escort. Pezdek and Sykocias put frisk, escort, the under two minutes, he was present (2) minutes before to watch Plaintiff exit the shower and dry off. Pezdek under to placed the razor, and the escort from the shower, and the slamming of Plaintiff(s) requested for Rev. Tomlinson, as Conducive and corroborated the premeditated potential of this assault and fabricated incident. Hodges denied Plaintiff this witness.

(Page Thirteen)

VI. Statement of Claims

- 2019, & a Subsequently Search on October 11 - 01 - 19 to recover the
weapon and write Plaintiff a fabricated narrative related Plaintiff;
St. John's, 11/11/19 Plaintiff Pursuit of the 11/11/19

(6.) Defendant Robert(S); Cell search on November 01, 2019, with
no end use, to retaliate against Plaintiff with a place
where to drop PRENSI on PREDER; The stripping of items, & placing
Defendant(S) White/Court & some shoes violated 1st, 8th & 14th

631) Defendant Hodge's, Arbitrating to have a guilty disposition of 45 days to ensure that ~~identical~~ be transferred from the facility, the nation's disregard of the disposition errors, because it violates 14th Amendment rights, 1st, 5th, 8th, 13th, 14th, 15th, 16th, 17th, 18th, 19th, 20th, 21st, 22nd, 23rd, 24th, 25th, 26th, 27th, 28th, 29th, 30th, 31st, 32nd, 33rd, 34th, 35th, 36th, 37th, 38th, 39th, 40th, 41st, 42nd, 43rd, 44th, 45th, 46th, 47th, 48th, 49th, 50th, 51st, 52nd, 53rd, 54th, 55th, 56th, 57th, 58th, 59th, 60th, 61st, 62nd, 63rd, 64th, 65th, 66th, 67th, 68th, 69th, 70th, 71st, 72nd, 73rd, 74th, 75th, 76th, 77th, 78th, 79th, 80th, 81st, 82nd, 83rd, 84th, 85th, 86th, 87th, 88th, 89th, 90th, 91st, 92nd, 93rd, 94th, 95th, 96th, 97th, 98th, 99th, 100th, 101st, 102nd, 103rd, 104th, 105th, 106th, 107th, 108th, 109th, 110th, 111th, 112th, 113th, 114th, 115th, 116th, 117th, 118th, 119th, 120th, 121st, 122nd, 123rd, 124th, 125th, 126th, 127th, 128th, 129th, 130th, 131st, 132nd, 133rd, 134th, 135th, 136th, 137th, 138th, 139th, 140th, 141st, 142nd, 143rd, 144th, 145th, 146th, 147th, 148th, 149th, 150th, 151st, 152nd, 153rd, 154th, 155th, 156th, 157th, 158th, 159th, 160th, 161st, 162nd, 163rd, 164th, 165th, 166th, 167th, 168th, 169th, 170th, 171st, 172nd, 173rd, 174th, 175th, 176th, 177th, 178th, 179th, 180th, 181st, 182nd, 183rd, 184th, 185th, 186th, 187th, 188th, 189th, 190th, 191st, 192nd, 193rd, 194th, 195th, 196th, 197th, 198th, 199th, 200th, 201st, 202nd, 203rd, 204th, 205th, 206th, 207th, 208th, 209th, 210th, 211st, 212nd, 213th, 214th, 215th, 216th, 217th, 218th, 219th, 220th, 221st, 222nd, 223rd, 224th, 225th, 226th, 227th, 228th, 229th, 230th, 231st, 232nd, 233rd, 234th, 235th, 236th, 237th, 238th, 239th, 240th, 241st, 242nd, 243rd, 244th, 245th, 246th, 247th, 248th, 249th, 250th, 251st, 252nd, 253rd, 254th, 255th, 256th, 257th, 258th, 259th, 260th, 261st, 262nd, 263rd, 264th, 265th, 266th, 267th, 268th, 269th, 270th, 271st, 272nd, 273rd, 274th, 275th, 276th, 277th, 278th, 279th, 280th, 281st, 282nd, 283rd, 284th, 285th, 286th, 287th, 288th, 289th, 290th, 291st, 292nd, 293rd, 294th, 295th, 296th, 297th, 298th, 299th, 300th, 301st, 302nd, 303rd, 304th, 305th, 306th, 307th, 308th, 309th, 310th, 311st, 312nd, 313th, 314th, 315th, 316th, 317th, 318th, 319th, 320th, 321st, 322nd, 323rd, 324th, 325th, 326th, 327th, 328th, 329th, 330th, 331st, 332nd, 333rd, 334th, 335th, 336th, 337th, 338th, 339th, 340th, 341st, 342nd, 343rd, 344th, 345th, 346th, 347th, 348th, 349th, 350th, 351st, 352nd, 353rd, 354th, 355th, 356th, 357th, 358th, 359th, 360th, 361st, 362nd, 363rd, 364th, 365th, 366th, 367th, 368th, 369th, 370th, 371st, 372nd, 373rd, 374th, 375th, 376th, 377th, 378th, 379th, 380th, 381st, 382nd, 383rd, 384th, 385th, 386th, 387th, 388th, 389th, 390th, 391st, 392nd, 393rd, 394th, 395th, 396th, 397th, 398th, 399th, 400th, 401st, 402nd, 403rd, 404th, 405th, 406th, 407th, 408th, 409th, 410th, 411st, 412nd, 413th, 414th, 415th, 416th, 417th, 418th, 419th, 420th, 421st, 422nd, 423rd, 424th, 425th, 426th, 427th, 428th, 429th, 430th, 431st, 432nd, 433rd, 434th, 435th, 436th, 437th, 438th, 439th, 440th, 441st, 442nd, 443rd, 444th, 445th, 446th, 447th, 448th, 449th, 450th, 451st, 452nd, 453rd, 454th, 455th, 456th, 457th, 458th, 459th, 460th, 461st, 462nd, 463rd, 464th, 465th, 466th, 467th, 468th, 469th, 470th, 471st, 472nd, 473rd, 474th, 475th, 476th, 477th, 478th, 479th, 480th, 481st, 482nd, 483rd, 484th, 485th, 486th, 487th, 488th, 489th, 490th, 491st, 492nd, 493rd, 494th, 495th, 496th, 497th, 498th, 499th, 500th, 501st, 502nd, 503rd, 504th, 505th, 506th, 507th, 508th, 509th, 510th, 511st, 512nd, 513th, 514th, 515th, 516th, 517th, 518th, 519th, 520th, 521st, 522nd, 523rd, 524th, 525th, 526th, 527th, 528th, 529th, 530th, 531st, 532nd, 533rd, 534th, 535th, 536th, 537th, 538th, 539th, 540th, 541st, 542nd, 543rd, 544th, 545th, 546th, 547th, 548th, 549th, 550th, 551st, 552nd, 553rd, 554th, 555th, 556th, 557th, 558th, 559th, 560th, 561st, 562nd, 563rd, 564th, 565th, 566th, 567th, 568th, 569th, 570th, 571st, 572nd, 573rd, 574th, 575th, 576th, 577th, 578th, 579th, 580th, 581st, 582nd, 583rd, 584th, 585th, 586th, 587th, 588th, 589th, 590th, 591st, 592nd, 593rd, 594th, 595th, 596th, 597th, 598th, 599th, 600th, 601st, 602nd, 603rd, 604th, 605th, 606th, 607th, 608th, 609th, 610th, 611st, 612nd, 613th, 614th, 615th, 616th, 617th, 618th, 619th, 620th, 621st, 622nd, 623rd, 624th, 625th, 626th, 627th, 628th, 629th, 630th, 631st, 632nd, 633rd, 634th, 635th, 636th, 637th, 638th, 639th, 640th, 641st, 642nd, 643rd, 644th, 645th, 646th, 647th, 648th, 649th, 650th, 651st, 652nd, 653rd, 654th, 655th, 656th, 657th, 658th, 659th, 660th, 661st, 662nd, 663rd, 664th, 665th, 666th, 667th, 668th, 669th, 670th, 671st, 672nd, 673rd, 674th, 675th, 676th, 677th, 678th, 679th, 680th, 681st, 682nd, 683rd, 684th, 685th, 686th, 687th, 688th, 689th, 690th, 691st, 692nd, 693rd, 694th, 695th, 696th, 697th, 6

64) Defendant Food Administrator John Doe, consisting Seder
spoiled apple sauce, for fruit), caused Plaintiff lose 46 Pounds
42+) and ignoring Plaintiff Defendant Ellis water damaged isolated
Plaintiff 1st) 8th; p/crta Plaintiff rights/Pursuant to the US Constitution 4th & 14-

65) Defendant 161 Sykoclas, MBIL, to Lave & a facilitator in
intell for reporting REA on needles, suppress Plaintiff 6. REA classing
Snyder's Scheme to have a MBIL to suppress Plaintiff 6. REA classing
as well as failure to protect Plaintiff 6. REA classing

(Page Thirteen)

VI. Prayer for Relief.

WHEREFORE, Plaintiff Swears under the Penalty of Perjury of the following is, Pursuant to CPLR 2106.

- (a) First Count: Judgment against Defendants & full pay, including a pro rata rate of \$282.00 per day of unlawful confinement, along with compensatory damages as well as punitive damages, in the sum of (2.5) Two Billion - five million dollars \$2,500,000,000.
- (b) Second Count: Judgment against for violating U.S. Constitutional Amendment Rights, that Protected Plaintiff, compensatory & punitive damages.
- (c) Third Count: Judgment against Defendants for violating New York State Correction Law, New York Codes, Rules, & Regulations; Title Seven (7) Compensatory damages, costs, & punitive damages, along with such other relief as this Court deems just and proper.

By: Ato Burrell

Dated: June 26, 2022

Respectfully Submitted

A. B. B.

Pro-Se; 309 Borchard Rd
Molokai, NY 12953.

(Page Fourteenth)

The Violation of 18 U.S.C. 1962(b), the Acquisition,
Maintenance of the interest in & Control of the
Enterprise;

Exhibit

A

AFFIDAVIT OF SERVICE

STATE OF NEW YORK)

COUNTY OF CLINTON)ss.:

AKO K. BURRELL being duly sworn, deposes and says:

That I am the person named herein and make this Affidavit of Service to establish service upon the below named parties pertaining to **CERTIFICATE OF READINESS FOR TRIAL** in a sealed envelope and placed in a U.S. postal box located at Clinton Corr. Fac., Box 2001, Dannemora, New York 12929, and served upon the below named parties.

HON. RICHARD E. SISE
ROBERT ABRAMS BUILDING
FOR LAW AND JUSTICE
BOX 7344,CAPITOL STATION
ALBANY, NEW YORK 12224

A. B. C.

Sworn to before me this

28th Day of MAY, 2020

John Andrew Farrell

JOHN ANDREW FARRELL
Notary Public, State of New York
No. 01FA6381949
Qualified in Clinton County 22
Commission Expires 10/15/20

STATE OF NEW YORK: COURT OF CLAIMS

AKO BURRELL,

Claimant.

TORT

Claim No. 134018 ~~13408~~ 134109
HON. RICHARD E. SISE

-VS-

THE STATE OF NEW YORK,

Defendant.

(PURSUANT TO C.P.L.R. 3402; N.Y. COMP. CODES R & REGS. TIT. 22§206. 12)

NOTICE OF ISSUE

CALENDAR NO. 2019-2020

CLAIM NO. 134018 ~~13408~~ 134109

NEW YORK STATE COURT OF CLAIMS

NOTICE FOR TRIAL

FILED BY AKO BURRELL FOR AKO BURRELL

DATE CLAIM FILED: 11-22-19 ~~12-09-19~~

DATE CLAIM SERVED: 12-26-19 ~~01-09-20~~

DATE ISSUED JOINED: 01-15-20 ~~01-21-20~~

STATE OF NEW YORK: COURT OF CLAIMS

AKO K. BURRELL,

Claimant

TORT

-VS-

THE STATE OF NEW YORK,

Defendant.

PURSUANT to C.P.L.R. 3402; N.Y. Comp. Codes R & Regs. Tit 22 §206. 12

CERTIFICATE OF READINESS FOR TRIAL

- | | |
|--|--------------|
| 1. All proceedings served and filed | Complete |
| 2. bill of particulars served and filed. | Complete |
| 3. physical examinations completed. | Waived |
| 4. medical reports filed and exchanged | Not Required |
| 5. expert reports filed and exchanged | Complete |
| 6. discovery proceedings now known to be necessary to be completed. | |
| 7. there are no outstanding requests | Not Required |
| 8. there has been a reasonable opportunity to compete the foregoing proceedings. | |


9. there has been compliance with any order issued pursuant to section 206.10 of this part

10. opportunity for disclosure has been had not exploited.

11. the action is ready for trial.

Dated: May 28, 2020

Demand Jury Trial


AKO BURRELL #17b2994
CLINTON CORP. FAC.
P.O. BOX 2001
BANNEMORA, N.Y. 12929

Sworn to before me this

28th Day of MAY, 2020


NOTARY

JOHN ANDREW FARRELL
Notary Public, State of New York
No. 01FA6381949
Qualified in Clinton County
Commission Expires 10/15/20 22

VERIFICATION

STATE OF NEW YORK)

COUNTY OF CLINTON)ss.:

AKO BURRELL, being duly sworn, deposes and says that he is the Claimant in the within proceeding; that he has read the foregoing CERTIFICATE OF READINESS FOR TRIAL and knows the contents thereof; that the same is true to his knowledge, except as to the matters alleged therein on information and belief and that as to those matters he believes them to be true.



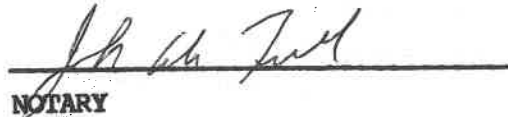
Clinton Corr. Fac.

P.O.BOX 2001

Dannemora, N.Y. 12929

Sworn to before me this

28th Day of May, 2020


NOTARY

JOHN ANDREW FARRELL
Notary Public, State of New York
No. 01FA6381949
Qualified in Clinton County
Commission Expires 10/15/20 22

Exhibit

B

JLW
6/29/22
P

76658-19

A. Burrell # 732994
ACF, P.O. Box 1419
Attica, NY 14011-0419
Date: 11-20-19

RECEIVED
NOV 20 2019
ATTICA CORR. FACILITY
SUPERINTENDENT'S OFFICE

Superintendent

RE: Complaint

Dear Noethy,

I have a religious Pendant at the PKG - Room, The
Sto Staff are denying my right to Practice my Faith I ask
You inform them that I may have this item.

Also, I would like a copy of my "Mail Watcher"
Ordered by your office.

Respectfully,

A. Burrell

A. B. SWELL # 1782994

16450-19

ACF, P.O. Box 149

COC RB-CE-14

Date: 10-24-19

IARC

RE: Grievance / CODE 49

To Whom it Concerns,

I write, because Sgt. Synder Place me on a Deprivation of Shower's, in retaliation of me filing a PREA Complaint on Officer Pezdek. Sgt. Synder, failed to provide Good Cause why I was placed on this order. Sgt. Synder, told me if I Sign off on my PREA Complaint he will Sign off on my Shower Deprivation.

Resolution: I would like the Deprivation order for my Showers to be lifted. I also would like any form of Retiallation to be resisted by this Sgt. Snyder.

INMATE GRIEVANCE COMPLAINT

Grievance No.

76457-19

Attica CORRECTIONAL FACILITY

Date:

Name: AKO K. Burrell Dept. No.: 17B 2994 Housing Unit: RB-CE-14
Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I have been held on a Shower Deprivation beyond the required 7 days week. Officer Norton Stated "that's wrong, you have to miss 7 Showers". The Directive 4933 States 1 week, unless a renewal. No renewal was made, this error was made based off a misinterpretation of Directive 4933, by this officer & his supervisor. Inmate has dry blood, & open wounds that are infected, he has a bloody clogged nose & left ear, due to not being allowed showers.

Grievant Signature: AKO Burrell

Grievance Clerk:

Date:

NOV 06 2019
ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested ☐ YES ☐ NO Who:

Action requested by inmate: I request the Shower Deprivation order & renewal be produced, as well as an immediate stop of the Shower Deprivation order.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant Signature: Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

INMATE GRIEVANCE COMPLAINT

Grievance No.

76457-19

Attica

wants 24 deprivation
order copies

CORRECTIONAL FACILITY

Date: 11-1-19

Name:

A. Burrell

Dept. No.:

17B2994

Housing Unit:

RB-CE-14

Program:

AM

PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHU SUPERVISORS, refuse to furnish the Deprivation order, & Cell Shield order. They had 24 hours to furnish this document, & have yet to do it.

Grievant

Signature:

A. Bell

Grievance Clerk:

Date:

RECEIVED

Advisor Requested

☐ YES☐ NO

Who:

NOV 04 2019

Action requested by inmate:

I would like copies of my deprivation order, & Cell Shield order.

ATTICA CORR. FACILITY

INMATE GRIEVANCE

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

A time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (REVERSE) (9/12)

Response of IGRC: Grievance is **DENIED**.

Per Sgt. F... Grievant has been given copies of the deprivation orders.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because grievant was in the SHU/Long Term Keep Lock.

NOV 13 2019

Date Returned to Inmate: _____

IGRC Members: _____

Chairperson: _____

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.

Signed: _____

Grievant

Date _____

Grievance Clerk's Receipt _____

Date _____

To be completed by Grievance Clerk.

Grievance Appealed to the Superintendent: _____

Date _____

Grievance forwarded to the Superintendent for action: _____

Date _____

INMATE GRIEVANCE COMPLAINT

Grievance No.
76820-19

Attica CORRECTIONAL FACILITY

Date: 12-16-19

Name: A. Burrell

Dept. No.: 1762994

Housing Unit: B-18-07

Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I was imposed with a keeplock disposition on 10-17-19, I was pre-hearing confined in the SHU on 10-15-19. Pursuant to Directive 4933; 301.6 Keeplock Admission(c) "When Keeplock Sanction is imposed & is served in a SHU cell, service of the sanction will be created at the rate of three days for every two days served in the SHU cell." Therefore, I served my 90 day keeplock disposition, prior to any SHU disposition, on 10-30-19, I received a 45 SHU disposition. The Attica ISS is unlawfully confining me, I was released from the SHU on 10-18-19. So I should have a SHU release date of 12-17-19. My sanctions are miscomputed.

Grievant

Signature: A. Burrell

RECEIVED

Grievance Clerk:

Date:

DEC 17 2019

Advisor Requested ☐ YES ☐ NO

Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I write request to be released from keeplock

Immediately, due to my disposition, is erroneously, & this is unlawful confinement.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

Response of IGRC: Grievance is DISMISSED & CLOSED.

Per Directive #4040 §701.5 (b)(4)(i)(a) The IGRC may dismiss and close a grievance after a hearing if it determines, by majority vote (3 of 4) that the grievant is seeking a decision or an appeal of a decision otherwise attainable through the established procedures for disciplinary and time allowance committee proceedings.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because the grievant is in SHU/Long Term Keep Lock.

Date Returned to Inmate: DEC 18 2019

IGRC Members:

Chairperson:

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.

Signed: _____

Grievant

Date _____

Grievance Clerk's Receipt _____

Date _____

To be completed by Grievance Clerk.

Grievance Appealed to the Superintendent: _____

Date

Grievance forwarded to the Superintendent for action: _____

Date

INMATE GRIEVANCE COMPLAINT

22

24
Wants Whites &
Removal from SHU

Grievance No.
76781-19

Attica

CORRECTIONAL FACILITY

Name: A. Burrell Date: 12-09-19
Dept. No.: 17B2994 Housing Unit: RB-CE-14
Program: _____ AM _____ PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Sgt. Fox informed me last week
that a modification was made to my disciplinary sanctions, giving
me a release date for 12-09-19. I was again informed by Sgt.
Fox that I would be removed from the SHU on 12-09-19.
I packed all my items, & disposed of my whites, & I
was informed I would not be leaving the SHU.

Grievant
Signature: A. Burrell

RECEIVED

DEC 11 2019

Grievance Clerk: _____

Date: ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested ☒ YES ☐ NO Who: _____

Action requested by inmate: I would like a new set of whites
& to be removed from the SHU.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature: _____ Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

Response of IGRC: Grievance is DENIED.

Per Sgt. F...he did inform the grievant that 12/9/19 would be his last day in SHU, meaning he would be released from SHU on 12/10/19 and grievant was released from SHU on 12/10/19. Grievant elected to throw out his whites in the garbage by his own accord and there is a policy for replacement. Grievant can request for the items from state shop and if he is not due for an issue he can fill out a disbursement for voluntary restitution for the items he threw out.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because the grievant is in SHU/Long Term Keep Lock.

Date Returned to Inmate: DEC 18 2019

IGRC Members:

Chairperson:

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.Signed: _____
Grievant_____
Date_____
Grievance Clerk's Receipt_____
Date**To be completed by Grievance Clerk.**Grievance Appealed to the Superintendent: _____
DateGrievance forwarded to the Superintendent for action: _____
Date

INMATE GRIEVANCE COMPLAINT

28
Keeplock time
incorrectly calculated

Grievance No.
76458-19

Attica

CORRECTIONAL FACILITY

Date: 10-31-19

Name: A. Burrell

Dept. No.: 1762994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) DSS White, erroneously computed my
disciplinary sanctions. On 10-17-19, a disposition was rendered of 30 days keep lock
& etc., by H/O Ct. Ensel. I had no sth time at the time this disposition was
imposed, therefore pursuant to Directive 4933; 301.6(c), I completed this
disposition on 10-31-19. Yet, my record reflects a keeplock ^{start & release} ~~release date~~
date of 12-14-19 to 1-03-20. This is erroneously placed. On 10-22-19, inmate
received a Tier III report, that held me in the sth Pre-Hearing Confinement.
See Page 7

Grievant
Signature: A. B. [Signature]

RECEIVED

Grievance Clerk: [Signature] Date: NOV 04 2019

Advisor Requested ☒ YES ☐ NO Who: ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I ask my 10-17-19 keeplock disposition, be satisfied.
My 10-30-19 disposition, be accredited Pre-hearing Confinement from
10-22-19 to 10-30-19, and I receive a copy of this computation

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature: _____ Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

cell 24 cell lights

Grievance No.
76512-19

Attica

CORRECTIONAL FACILITY

Date: 11-07-19

Name: A. Burrell

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHU officers, Sgt. Fox, Roberts, McJury, Pezdek, & Ellis, Have turned the lights off in my cell & has increased the Water Pressure, to a point water sprouts from my sink into my wall. I have requested the cell night lights be turned on, until the power is turned on. This is stopping me from doing my legal work, reading books, praying, & writing letters.

Grievant Signature: A. B. ell

Grievance Clerk:

Date:

RECEIVED

OCT 08 2019

Advisor Requested ☐ YES ☐ NO Who:

ATTICA CORR. FACILITY

Action requested by inmate: I want the night lights turned on until the standard power in the cell, to be turned on, so I can write & please use the 6th & 1st Amendment. The water pressure be turned down.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

Like

Grievance No.

76450-19

Attica

CORRECTIONAL FACILITY

Name:

A. Burrell

Date:

10-30-19

Dept. No.:

17B2994

Housing Unit:

RB-CE-14

Program:

AM

PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHU officer's are retaliating against me for filing a PIREA complaint on Officer Pezdek, they actions are, but not limited too: Refusing me meals, Refusing me Showers, Refusing me Commissary, Threats of violence, threats of false misbehavior reports, Denial of Law Library, Denial of Recreation, Denial of supplies, removal of state issue clothing, & refusal to give me mail.

Grievant

Signature:

A. Bell

RECEIVED

Grievance Clerk:

Date:

NOV 04 2019

Advisor Requested

☐ YES☐ NO

Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate:

I wish to have the following SHU officers investigated for harassment pursuant to CODE-49 of Directive 4040 & Screened for Alcohol & Substances that are controlled. Sgt. Fox, Shelby, Snyder, SKO CZYLAS, Lee, Urban, Majorana, & Roberts.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

49
Sgt. Threat

Grievance No.
76505-10

Attica

CORRECTIONAL FACILITY

Name: A. Burrell Date: 10-31-19
Dept. No.: 17B2994 Housing Unit: 12B-CE-14
Program: _____ AM _____ PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Sgt. Fox told me if I did not
drop my sexual assault (Prea) Complaint, against Officer Pezdek
that he will put the Cell Shield over my Cell door

Grievant
Signature: A. Burrell

RECEIVED

Grievance Clerk: _____ Date: NOV 06 2019

Advisor Requested ☒ YES ☐ NO Who: _____

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I ask for this Sgt. to stop retaliating
against me, & remove the Cell Shield.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature: _____ Date: _____

INMATE GRIEVANCE COMPLAINT

CODE-49 49 Harassment

Grievance No. 76504-19

Attica

CORRECTIONAL FACILITY

Date: 10-31-19

Name: A. Burrell

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program:

AM

PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Officer McLee, entered my cell on 10-30-19, & Planted a Sharp Object that was Plastic Pointed. I informed the Area Supervisor. My cell smelled of Alcohol & a Smoky Substance. I entered my cell after a hearing. B noticed my cell in disarray. I immediately inspected the cell. I found a Pointed Object in the corner near my Vent. This was an white object like a SHU toothbrush. Lee was the last person in my cell. I flushed this object, to not face a Prosecution. I showed the Grievant Signature: A. B. L. this weapon to the Imam, Gasman, before I flushed it.

NOV 06 2019

Grievance Clerk:

Date:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested ☐ YES ☐ NO

Who:

Action requested by inmate: I want officer Lee investigated & Potentially Prosecuted, he constantly harasses me, & a drug test, & a Sobriety test, taken on this officer. Also Imam Gasman can testify I showed him the weapon, before I flushed it.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

22
Refused
medical
attention
CORRECTIONAL FACILITY

Grievance No.
76703-19

Attica

Name: A. Burrell Date: 11-30-19
Dept. No.: 17B2994 Housing Unit: RB-CE-14
Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Nurse Sault, refused me batonician
For my anal wound, this nurse is asked to see the rash/wound, I
volunteer to show it to her, She refused. I then, asked for her name to
file a grievance, this nurse stated "we got your name too", This was in
a retaliatory nature, I asked 15 Cell of (CE) to retrieve the name for
me. Once Nurse Sault, was done with 15 Cell med. run, I asked 15 Cell
for her name, # he gave it to me. This nurse then began to accuse me of
interfering with a med run & I never spoke to her.

Grievant

Signature: A. Burrell

Grievance Clerk:

Date:

RECEIVED

Advisor Requested ☐ YES ☐ NO Who:

DEC 08 2019

Action requested by inmate: I would like this nurse investigated for
refusing me medical attention & for threatening me.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature: Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

16.

INMATE GRIEVANCE COMPLAINT

Grievance No.

0186-20

Attica

22 Neurological Review

CORRECTIONAL FACILITY

Date: 02-03-20

Name: A. Burrell

Dept. No.: 17B 2994 Housing Unit: 02-03-20

Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The Doctor who examined me has refused to submit a neurological review/diagnoses for my lower back, stipulating physical therapy. I have no reason to take physical therapy for sacatic nerve damage, this physical therapy stipulation is an impediment.

Grievant

Signature: A. Burrell

RECEIVED

Grievance Clerk: [Signature]

Date: FEB 04 2020

Advisor Requested ☐ YES ☐ NO Who:ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I request to be seen by a neurologist for my back

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature: _____

Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (REVERSE) (9/12)

Response of IGRC: Grievance is DENIED.

Grievant was seen and assessed by a provider on 1/27/2020 for complaints of lower back pain. Grievant is scheduled for physical therapy for an evaluation and treatment.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because the grievant is in SHU/Long Term Keep Lock.

Date Returned to Inmate: FEB 07 2020

IGRC Members:

Chairperson:

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.Signed: _____
Grievant_____
Date_____
Grievance Clerk's Receipt_____
Date**To be completed by Grievance Clerk.**Grievance Appealed to the Superintendent: _____
DateGrievance forwarded to the Superintendent for action: _____
Date

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

INMATE GRIEVANCE COMPLAINT

male 24 cell lights

(11)

Grievance No.
76512-19

Attica

CORRECTIONAL FACILITY

Date: 11-07-19

Name: A. Burrell

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHU officers, Sgt. Fox, Roberts, McJury, Pezdek, & Ellis, Have turned the lights off in my cell & has increased the Water Pressure, to a point water sprouts from my sink into my wall. I have requested the cell night lights be turned on, until the power is turned on. This is stopping me from doing my legal work, reading books, praying, & writing letters.

Grievant

Signature: A. B. B.

Grievance Clerk:

Date:

RECEIVED

OCT 08 2019

Advisor Requested

☐ YES☐ NO

Who:

Action requested by inmate:

I want the night lights turned on until the standard power in the cell, to be turned on, so I can write letters. Use the 1st Amendment. The water pressure be turned down.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature: Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

76512-19

FORM 2131E (REVERSE) (9/12)

Response of IGRC: Grievance is **DENIED**.

Per Sgt. F... grievant's lights were out because another inmate on the 3rd floor east gallery damaged a breaker by lighting a wick. Once maintenance fixed the breaker the lights were turned back on. Water pressure was not increased by staff as all the cells are provided water from one pipe.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because grievant was in the SHU/Long Term Keep Lock.

NOV 22 2019

Date Returned to Inmate: _____

IGRC Members: _____

Chairperson: _____

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.

☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.

☐ I agree with the IGRC response and wish to appeal to the Superintendent.

☐ I apply to the IGP Supervisor for review of dismissal.

Signed: _____

Grievant

Date _____

Grievance Clerk's Receipt _____

Date _____

To be completed by Grievance Clerk.

Grievance Appealed to the Superintendent: _____

Date _____

Grievance forwarded to the Superintendent for action: _____

Date _____

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

INMATE GRIEVANCE COMPLAINT

Grievance No.
76820-19

Attica

CORRECTIONAL FACILITY

Date: 12-16-19

Name: A. Burrell

Dept. No.: 1782994

Housing Unit: B-18-07

Program: _____ AM _____ PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I was imposed with a Keeplock disposition on 10-17-19, I was Pre-hearing Confined in the SHU on 10-15-19. Pursuant to Directive 4933; 301.6 Keeplock Admission(c) "When Keeplock Sanction is imposed & is Served in a SHU cell, Service of the Sanction will be created at the rate of three days for every two days Served in the SHU Cell." Therefore, I served my 90 day Keeplock disposition, Prior to any SHU disposition, on 10-30-19, I received a 45 SHU disposition. The Attica ISS is unlawfully Confining me, I was released from the SHU on 10-18-19. So I should have a SHU release date of 12-17-19. My Sanctions are miscomputed.

Grievant

Signature: A. Burrell

RECEIVED

Grievance Clerk: _____

Date: DEC 17 2019

Advisor Requested

☐ YES☐ NO

Who: _____

ATTICA CORR. FACILITY
INMATE GRIEVANCEAction requested by inmate: I write request to be released from Keeplock

Immediately, due to my disposition, is erroneously, & this is unlawful Confinement.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature: _____

Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

code 57 outdated Food Items

Grievance No.
76618-19

Attica

CORRECTIONAL FACILITY

Date: 11-16-19

Name: A. Burrell

Dept. No.: 1762994

Housing Unit: 2B-CR-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I have been receiving kosher meals for the last 46 days in the SHU. The Apple Sauce, are Expired. Today, I informed C.O. Ellis the Expiration date was 08-11-19, that I would like a fruit or snack (kosher), is substitute of this spoil item. This is a violation of my 1st Amendment (Religious Clause); 8th Amendment (Equal & Unusual Punishment Clause).

RECEIVED

Grievant

Signature: A. B. B.

NOV 19 2019

Grievance Clerk:

Date:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested ☒ YES ☐ NO Who:

Action requested by inmate: I would like fresh fruits, & valid Apple Sauce, & for the SHU to provide such items.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

cell 22 Shoulder Pain

Grievance No.
76329-14

Attica

CORRECTIONAL FACILITY

Date: 10-09-19

Name: AKO Burrell

Dept. No.: 17B2994 Housing Unit: CE-14

Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The Doctor is refusing to examine my right shoulder & the left wrist of my body. The Doctor, ~~was~~ was informed of my right shoulder since 9-25-19, & I have no feeling in my left wrist. The Doctor, was informed by me of the pain & suffering that I am in. She said "Yeah, whatever, when I get to you, you'll be alright, you not dying you gonna make it." I'm in so much pain I can't sleep, or move.

Grievant Signature: AKO Burrell

RECEIVED

Grievance Clerk: Date: OCT 16 2019

Advisor Requested ☒ YES ☐ NO Who: ATTICA CORR. FACILITY INMATE GRIEVANCE

Action requested by inmate: I would like to be treated by either NYS DOCS medical staff or on an outside hospital.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant Signature: Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

Grievance No.

Attica

CORRECTIONAL FACILITY

Date: 11-15-19

Name: AKO Burrell

Dept. No.: 17182994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHV Supervisor & Staff, unlawfully confined me, by not allowing me my Phone Call Pursuant to Correction Law 137(g). I was admitted to SHV 09-27-19. I did not receive a Phone Call until 11-08-19. The Correction Law 137(g) Statute went into effect since 09-13-19, the Attica SHV, have not acknowledge this, & I informed them of this fact on numerous occasions, & they refused me the phone the whole month of October & my Admission Call as well.

Grievant
Signature:

A. Bell

RECEIVED

Grievance Clerk:

Date:

NOV 22 2019

Advisor Requested ☐ YES ☐ NO Who:

ATTICA CORRECTIONAL FACILITY

INMATE GRIEVANCE

Action requested by inmate: I would like this matter investigated, as of why I was confined outside of the Correction Law 137(g)

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

Grievance No.

76496-19

Attica

26
unlawfully
confined

CORRECTIONAL FACILITY

Date: 11-05-19

Name: AKO K. Burnett

Dept. No.: 1762994

Housing Unit: CB-CE-14

Program:

AM

PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I'm being Confined unlawfully, my ticket was expunged on 10-24-19. I had been Confined for 24 days at that point. Since my Expungement, Sgt. Fox, Lee, Roberts, D.SS White, Noeth, Ridder, Shelby, & McAllen, have been retaliating towards me, by refusing me rec, mail, packages, legal mail, medical, & Law Library services. I have been Sanctioned to SHU unlawfully, by no Confineement Submission being made. This is a constant violation to my rights. They are maliciously Confineing me in the rec yard, before the Facility Court's step & beyond I have

Grievant Signature: AKO Burnett

RECEIVED

Grievance Clerk:

Date: NOV 06 2019

Advisor Requested ☒ YES ☐ NO

Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: To have my mail, packages, legal mail, medical rec, & Law Library brought to me. To have my cell shield removed, & to be housed according to the Constitutional Conditions of Confineement.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

76496-19
FORM 2019 (REVERSE) (9/2)**Response of IGRC:** Grievance is **DENIED**.

Grievant received a Tier II Misbehavior Report which is still pending a disposition.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because grievant was in the SHU/Long Term Keep Lock.

Date Returned to Inmate: NOV 08 2019

IGRC Members:

Chairperson:

Return within 7 calendar days and check appropriate boxes.*

☒ I disagree with IGRC response and wish to appeal to Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.Signed: A. Bell

Grievant

Date

Grievance Clerk's Receipt

Date

To be completed by Grievance Clerk.Grievance Appealed to the Superintendent: _____
DateGrievance forwarded to the Superintendent for action: _____
Date

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

²⁴
wants deprivation
order copies

Grievance No.
76457-19

Attica

CORRECTIONAL FACILITY

Name: A. Butell Date: 11-1-19
Dept. No.: 17B 2994 Housing Unit: RB-CE-14
Program: _____ AM _____ PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) The SHU Supervisors, refuse
to furnish the Deprivation order, & Cell Shield order. At
They had 24 hours to furnish this document, & have
yet to do it.

Grievant
Signature: A. Bell

Grievance Clerk: _____

Date: _____

RECEIVED

NOV 04 2019

Advisor Requested ☐ YES ☐ NO Who: _____

Action requested by inmate: I would like copies of my deprivation
order, & Cell Shield order.

ATTICA CORR. FACILITY
INMATE GRIEVANCE

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature: _____ Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

40
Denied forms

Grievance No.
76661-19

Attica

CORRECTIONAL FACILITY

Date: 11-22-19

Name: A. Burrell

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I have requested exhibit forms A-Z from the law library. The clerk has informed me they do not exist, which I know this to be untrue, the general population has these documents, so I ask for them to fill my motion to the courts.

Grievant
Signature: A. Burrell

Grievance Clerk:

Date:

NOV 25 2019

Advisor Requested ☒ YES ☐ NO Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I would like copies of exhibit A-Z forms.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

34

Grievance No.
76618-19

Attica

code 37 outdated Food Items

CORRECTIONAL FACILITY

Date: 11-16-19

Name: A. Burrell

Dept. No.: 17B 2994

Housing Unit: 2B-CR-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I have been receiving kosher meals for the last 46 days in the SHU. The APPLE Slices, are EXPIRED. To day, I informed C.O. Ellis the Expiration date was 08-11-19, that I would like a fruit or snack (kosher), is substitute of this spoil item. This is a violation of my 1st Amendment (Religious Clause); 8th Amendment (Cruel & Unusual Punishment Clause).

Grievant
Signature: A. B. B.

Grievance Clerk:

Date:

RECEIVED

NOV 19 2019

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested ☒ YES ☐ NO Who:

Action requested by inmate: I would like fresh fruits, & valid APPLE Slices, & for the SHU to provide such items.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant
Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (REVERSE) (9/12)

Response of IGRC: Grievance is **ACCEPTED**.

Staff have been instructed to check all expiration dates as a corrective action.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because grievant was in the SHU/Long Term Keep Lock.

Date Returned to Inmate: NOV 22 2019 IGRC Members: C. T. [Signature] Sht.
[Signature] Chairperson [Signature] ORC
[Signature]

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.☐ I agree with the IGRC response and wish to appeal to the Superintendent.☐ I apply to the IGP Supervisor for review of dismissal.Signed: _____
Grievant_____
Date_____
Grievance Clerk's Receipt_____
Date**To be completed by Grievance Clerk.**Grievance Appealed to the Superintendent: _____
DateGrievance forwarded to the Superintendent for action: _____
Date

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

INMATE GRIEVANCE COMPLAINT

Attica

30
Denied
Pendant
CORRECTIONAL FACILITY

Grievance No.

76658-19

Date: 11-22-19

Name: Amburnell

Dept. No.: 17B2994

Housing Unit: 12B-CE-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Sgt. Fox, DSS White, & the Pkg. room, are refusing me my religious Pendant, mailed from Sunshine Jewelry.

Grievant
Signature: A. B. Bell**RECEIVED**

Grievance Clerk:

Date:

NOV 25 2019

Advisor Requested: ☒ YES ☐ NO

Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: I would like my religious Pendant or have it placed in my Personal Property.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:
(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

INMATE GRIEVANCE COMPLAINT

26
Unlawfully
Confined

Attica

CORRECTIONAL FACILITY

Grievance No.
76496-19

Date: 11-05-19

Name: AKO K. Burnett

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program: AM PM

(Please Print or Type – This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) I'm being Confined Unlawful, my ticket was expunged on 10-24-19. I had been Confined for 24 days at that point. Since my Expungement, Sgt. Fox, Lee, Roberts, D.SS White, Neeth, Ridder, Shelby, & McEllen. Have been retaliating towards me, by refusing me rec, mail, packages, legal mail, medical, & Law Library Services. I have been Sanctioned to SHU unlawfully, by no Confinement Submission being made. This is a constant violation to my rights. They are maliciously Confine me in the rec yard, before the Facility Court is even beyond 1 hour.

Grievant

Signature: AKO Burnett

RECEIVED

Grievance Clerk:

Date: NOV 06 2019

Advisor Requested ☒ YES ☐ NO Who:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Action requested by inmate: To have my mail, packages, legal mail, medical, rec, & Law Library brought to me. To have my cell shield removed, & to be housed according to the Constitutional Conditions of Confinement.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature: Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

FORM 2131E (9/12)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

INMATE GRIEVANCE COMPLAINT

Grievance No.

76458-19

28
Keeplock time
incorrectly calculated

Attica

CORRECTIONAL FACILITY

Date: 10-31-19

Name: A. Burrell

Dept. No.: 1762994

Housing Unit: RB-CE-14

Program: _____ AM _____ PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) DSS White, erroneously computed my disciplinary sanctions. On 10-17-19, a disposition was rendered of 30 days keep lock & etc., by H/O Ct. Ensel. I had no SHV time at the time this disposition was imposed, therefore pursuant to Directive 4933; 301.6(c), I completed this disposition on 10-31-19. Yet, my record reflects a keeplock start & release date of 10-14-19 to 1-03-20. This is erroneously placed. On 10-22-19, inmate received a Tier III report, that held me in the SHV Pre-Hearing Confinement.

Grievant

Signature: A. B. [Signature]

RECEIVED

Grievance Clerk: [Signature]

Date:

NOV 04 2019

Advisor Requested ☒ YES ☐ NO

Who:

ATTICA CORR. FACILITY

INMATE GRIEVANCE

Action requested by inmate: I ask- my 10-17-19 keeplock disposition, be satisfied. My 10-30-19 disposition, be accredited Pre-hearing Confinement from 10-22-19 to 10-30-19, and I receive a copy of this computation.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature: _____

Date: _____

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

76458-19
FORM 101E (REVERSE) (9/12)**Response of IGRC:** Grievance is **DISMISSED AND CLOSED.**

Per Directive #4040 §701.5 (b)(4)(i)(c)(2) The IGRC may dismiss and close a grievance after a hearing if it determines, by majority vote (3 of 4) that the grievant is seeking a decision or an appeal of a decision otherwise attainable through the established procedures for disciplinary and time allowance committee proceedings.

Per Directive #4040 §701.5 (b)(2)(ii)(a) this grievance was heard in absentia because grievant was in the SHU/Long Term Keeplock

Action requested by grievant is not an available remedy through the Inmate Grievance Program. Grievant must write to the disciplinary officer.

Date Returned to Inmate: **NOV 08 2019**

IGRC Members:

Chairperson:

Return within 7 calendar days and check appropriate boxes.*

☐ I disagree with IGRC response and wish to appeal to Superintendent.

☐ I have reviewed deadlocked responses. Pass-Thru to Superintendent.

☐ I agree with the IGRC response and wish to appeal to the Superintendent.

☐ I apply to the IGP Supervisor for review of dismissal.

Signed: _____

Grievant

Date _____

Grievance Clerk's Receipt _____

Date _____

To be completed by Grievance Clerk.

Grievance Appealed to the Superintendent: _____

Date

Grievance forwarded to the Superintendent for action: _____

Date

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

Exemption Page Attached

On, 10-30-19, the disposition was rendered, again erroneously, failing to calculate, my Pre-hearing confinement, from 10-02-19, up until 10-30-19. This, disposition, was rendered after my 10-17-19 disposition and my keeplock disposition was complete at this time. Yet, the record reflects inaccurately. Lastly, my disposition doesn't reflect that 10-30-19 disposition at all, nor does any of my dispositions reflect. So, DSS White, has made a error in the terms of my confinement & it may be unlawful, if my Due-Process right is violated.

INMATE GRIEVANCE COMPLAINT

Like

Grievance No.

76658-19

Attica

CORRECTIONAL FACILITY

Date: 11-20-19

Name: A. Bell

Dept. No.: 17B2994

Housing Unit: RB-CE-14

Program:

AM

PM

(Please Print or Type - This form must be filed within 21 calendar days of Grievance Incident)*

Description of Problem: (Please make as brief as possible) Inmate had a religious Pendant mailed to the Facility, Pursuant to 4911, 4202, & 4920 the U.S. 1st Amendment to the Constitution Sgt. Fox, & the Pkg room are denying my Cross Pendant be placed in my Personal Property & to with the I.R.C.

RECEIVED

Grievant

Signature: A. Bell

NOV 25 2019

Grievance Clerk:

Date:

ATTICA CORR. FACILITY
INMATE GRIEVANCE

Advisor Requested

☒ YES

☐ NO

Who:

Action requested by inmate:

I ASK my religious Pendant be placed in my Personal Property or given to me while in the SHU.

The Grievance has been formally resolved as follows:

This Informal Resolution is accepted:

(To be completed only if resolved prior to hearing)

Grievant

Signature:

Date:

If unresolved, you are entitled to a hearing by the Inmate Grievance Resolution Committee (IGRC).

* An exception to the time limit may be requested under Directive #4040, section 701.6(g).

H. BURRELL # 1782994

ACF, P.O. Box 149

COC RB-CE-14

Date: 10-24-19

IARC

RE: Grievance

To whom it concern,

I write, because Sgt. Snyder Place me on a Deprivation of Shower's, in retaliation of me filing a PRA complaint on Officer Pezdek. Sgt. Snyder, Failed to Provide Good Cause why I was placed on this order.

Resolution: I would like the Deprivation order for my Shower's to be lifted. I also would like any form of retaliation to be resisted by this Sgt. Snyder.

A. Burrell #17B 9994
ACF, P.O. Box 149
LOC: RB-CE-14
Date: 10-24-19

I GRC

RE: Grievance

To Whom it Concerns,



On 10-23-19 C.O. Dodek sexually assaulted me.

During a pat frisk leaving my cell he suited my penis & anus. Then, while I was in the shower he watched me exit & dry my body. I notice a huge bugle in his private area as he licked his lips in a sexual manner. Upon, walking back to my cell he slammed me against the wall & groped my buttocks causing a ~~split~~ split in my rectum area.

Resolution: I would like this to be investigated. I also wish to Press Criminal Charges, & have medical & mental health treatment.

Exhibit

C

 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76496-19	DATE FILED 11/6/19
	FACILITY Attica Correctional Facility	POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Unlawfully Confined	CLASS CODE 26
	SUPERINTENDENT'S SIGNATURE  <i>FDS</i>	DATE 12/17/19
GRIEVANT Burrell, A.	DIN 17R2994	HOUSING UNIT RB-CE-014

Grievance Denied Based Upon Information Provided:

The investigation into this matter shows that the grievant is complaining that he is being unlawfully confined. Upon review of the documentation provided, there has been no evidence submitted to substantiate any malfeasance by staff. The grievant was not unlawfully confined as he received a Tier 2 misbehavior report for an incident on 10/22/19 in which he was found guilty and received sanctions that included 45 days SHU and 45 days loss of packages, commissary and phones. Additionally, the grievant was issued a Tier 2 misbehavior report for an incident on 10/30/19 in which he was found guilty and received sanctions that included 10 days keeplock, 10 days loss of package, commissary and phones. Additionally, the grievant was given 20 days keeplock, loss of packages, commissary and phones suspended until 2/6/20. As such, this grievance is without merit and denied.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.

 GRIEVANT'S SIGNATURE


 DATE

 GRIEVANCE CLERK'S SIGNATURE

 DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
 Form 2133 (02/15)



 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76457-19		DATE FILED 11/4/19
	FACILITY Attica Correctional Facility		POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Wants Deprivation Order Copies		CLASS CODE 24
	SUPERINTENDENT'S SIGNATURE <i>[Signature]</i>		DATE 11/20/19
GRIEVANT BURRELL, A		DIN 17B2994	HOUSING UNIT RB-CE-14

The grievant states that he wants copies of the deprivation orders he has been sanctioned with.

Per investigation, Sgt. F. states grievant was provided with copies of the deprivation orders placed on him.

Based on the investigation, this grievance appeal is granted.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.

GRIEVANT'S SIGNATURE


DATE

GRIEVANCE CLERK'S SIGNATURE

DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
Form 2133 (02/15)

②

 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76457-19		DATE FILED 11/4/19
	FACILITY Attica Correctional Facility		POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Wants Deprivation Order Copies		CLASS CODE 24
	SUPERINTENDENT'S SIGNATURE <i>[Signature]</i>		DATE 11/20/19
GRIEVANT BURRELL, A	DIN 17B2994	HOUSING UNIT RB-CE-14	

The grievant states that he wants copies of the deprivation orders he has been sanctioned with.

Per investigation, Sgt. F. states grievant was provided with copies of the deprivation orders placed on him.

Based on the investigation, this grievance appeal is granted.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.


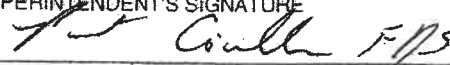
GRIEVANT'S SIGNATURE

DATE

GRIEVANCE CLERK'S SIGNATURE

DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
Form 2133 (02/15)

 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76450-19		DATE FILED 11/1/19
	FACILITY Attica Correctional Facility		POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Retaliation For Complaint		CLASS CODE 49
	SUPERINTENDENT'S SIGNATURE 		DATE 11/26/19
GRIEVANT Burrell, A.		DIN 17B2994	HOUSING UNIT RB-CE-014

Grievance Denied Based Upon Information Provided:


The investigation into this matter shows that the grievant is complaining that he was denied a shower in retaliation for filing a PREA complaint. Upon review of the documentation provided, there has been no evidence submitted to substantiate any malfeasance by staff. Lt. B... interviewed the grievant who had nothing further to add nor provided any witnesses to substantiate his claim. Sgt. S... provided a statement denying the grievant's allegation. The grievant was placed on shower deprivation for not following escort procedures. The grievant is advised that an employee's appropriate performance of his duties and the enforcement of the rules and regulations are not to be construed as harassment. As such, this grievance is without merit and denied.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.

_____	_____
GRIEVANT'S SIGNATURE	DATE
_____	_____
GRIEVANCE CLERK'S SIGNATURE	DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
Form 2133 (02/15)

 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76505-19	DATE FILED 11/6/19
	FACILITY Attica Correctional Facility	POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Sgt. Threat	CLASS CODE 49
	SUPERINTENDENT'S SIGNATURE <i>[Signature]</i>	DATE 11/26/19
GRIEVANT BURRELL, A	DIN 17B2994	HOUSING UNIT RB-CE-14

The grievant asserts that Sgt. F... threatened that if he did not drop his previous complaint and allegations against CO P. that a cell shield would be placed over his cell door.

Lt. W.... conducted an investigation in regard to the grievant's allegations. The grievant was interviewed 11/12/19. He had nothing to add to his written complaint and did not provide any witnesses to support his allegations. He stated he would only provide additional information to OSI.

Sgt. F... was interviewed and provided a written statement denying the allegations of threatening the grievant. The cell shield order was put in place per department guidelines.

Based on the investigation, there is no evidence to substantiate the grievant's allegations of malfeasance by staff. The grievance is denied.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.

 GRIEVANT'S SIGNATURE

 DATE

 GRIEVANCE CLERK'S SIGNATURE

 DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
 Form 2133 (02/15)

 Corrections and Community Supervision INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76329-19		DATE FILED 10/16/19
	FACILITY Attica Correctional Facility		POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Shoulder Pain		CLASS CODE 22
	SUPERINTENDENT'S SIGNATURE 		DATE 10/16/19
GRIEVANT BURRELL, A		DIN 17B2994	HOUSING UNIT RB-CE-14

The grievant states that he has not received proper medical attention for shoulder and wrist pain.

Per investigation, NA M. states grievant was seen on numerous dates in sick call and complained of shoulder pain from an old injury. An x-ray was completed, and a PT referral was ordered. He was seen for a follow up appointment and additional testing was ordered. Consistent with Health Services Policy Manual Item #1.43 - Specialty Care Referrals, the Facility Health Services Directors (FHSD) have the sole responsibility for providing treatment to the inmates under their care.

Based on the investigation, this grievance appeal is denied.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.



GRIEVANT'S SIGNATURE

DATE

GRIEVANCE CLERK'S SIGNATURE

DATE

*An exception to the time limit may be requested under Directive #4040, section 701.6 (g)
Form 2133 (02/15)

 INMATE GRIEVANCE PROGRAM SUPERINTENDENT	GRIEVANCE NO. A-76450-19		DATE FILED 11/1/19
	FACILITY Attica Correctional Facility		POLICY DESIGNATION Institutional
	TITLE OF GRIEVANCE Retaliation For Complaint		CLASS CODE 49
	SUPERINTENDENT'S SIGNATURE 		DATE 11/26/19
GRIEVANT Burrell, A.		DIN 17B2994	HOUSING UNIT RB-CE-014

Grievance Denied Based Upon Information Provided:


The investigation into this matter shows that the grievant is complaining that he was denied a shower in retaliation for filing a PREA complaint. Upon review of the documentation provided, there has been no evidence submitted to substantiate any malfeasance by staff. Lt. B... interviewed the grievant who had nothing further to add nor provided any witnesses to substantiate his claim. Sgt. S... provided a statement denying the grievant's allegation. The grievant was placed on shower deprivation for not following escort procedures. The grievant is advised that an employee's appropriate performance of his duties and the enforcement of the rules and regulations are not to be construed as harassment. As such, this grievance is without merit and denied.

APPEAL STATEMENT

If you wish to refer the above decision of the Superintendent please sign below and return this copy to your Inmate Grievance Clerk. You have seven (7) calendar days from receipt of this notice to file your appeal.* Please state why you are appealing this decision to C.O.R.C.

_____	_____
GRIEVANT'S SIGNATURE	DATE
_____	_____
GRIEVANCE CLERK'S SIGNATURE	DATE

Burrell 17 B2994

 <p>NEW YORK STATE Corrections and Community Supervision</p> <p>ANDREW M. CUOMO Governor</p> <p>ANTHONY J. ANNUCCI Acting Commissioner</p>	Grievance Number A-76504-19	Desig./Code I/49	Date Filed 11/06/19
	Associated Cases		Hearing Date 04/15/20
Facility Attica Correctional Facility		Title of Grievance Harassment	
INMATE GRIEVANCE PROGRAM CENTRAL OFFICE REVIEW COMMITTEE			

GRIEVANT'S REQUEST UNANIMOUSLY DENIED

Upon full hearing of the facts and circumstances in the instant case, the action requested herein is hereby denied.

CORC notes that the grievant's cell was frisked on 10/30/19 at 1:25 PM by CO L... and the contraband receipt indicates that disallowed items were disposed of and that no damage was done to his property. CO L... denies planting a sharp object in the grievant's cell or smelling like smoke and alcohol, and states that the cell frisk was authorized by the area supervisor. In addition, Imam G... states that he did witness the grievant flush something down the toilet but did not see the object as alleged. Further, area Sgt. E... states that he conducted rounds on the unit at approximately 6:46 PM on that date and the grievant did not inform him of any concerns. CORC also notes that the grievant was issued a Tier II MBR on 10/30/19 for interference and false information which was affirmed upon appeal by Lt. W... on 11/19/19. CORC asserts that an employee's appropriate performance of their duties and enforcement of the rules and regulations should not be construed as harassment.

CORC asserts that the grievance program is not intended to support an adversary process.


With regard to the grievant's appeal, CORC has not been presented with sufficient evidence of malfeasance by staff and notes that he has since been transferred. CORC advises him to address security concerns with supervisory staff at the time of the incident for the most expeditious means of resolution.

TAB/

Exhibit

D

Burrell 17B2994

 Corrections and Community Supervision ANDREW M. CUOMO ANTHONY J. ANNUCCI Governor Acting Commissioner	Grievance Number A-76505-19	Desig./Code I/49	Date Filed 11/06/19
	Associated Cases		Hearing Date 02/26/20
	Facility Attica Correctional Facility		
INMATE GRIEVANCE PROGRAM CENTRAL OFFICE REVIEW COMMITTEE		Title of Grievance Sergeant Threat	

GRIEVANT'S REQUEST UNANIMOUSLY DENIED AS WITHOUT MERIT

Upon full hearing of the facts and circumstances in the instant case, the action requested herein is hereby denied as without merit. CORC upholds the determination of the Superintendent for the reasons stated.

CORC notes that Sergeant F... denies threatening the grievant with a cell shield order for a complaint he submitted against an officer, and states that the grievant was placed on a cell shield order for refusing to return cell feed-up items.

With respect to the grievant's appeal, CORC notes that he did not name any witnesses in his written complaint and refused to name any when he was interviewed by Lieutenant W.... CORC has not been presented with sufficient evidence to substantiate retaliation or malfeasance by staff.


MPS/

Burrell

17B2994

Clinton

UH-11-10

 Corrections and Community Supervision ANDREW M. CUOMO Governor ANTHONY J. ANNUCCI Acting Commissioner	Grievance Number A-76512-19	Desig./Code I/24	Date Filed 11/08/19
	Associated Cases		Hearing Date 03/11/20
Facility Attica Correctional Facility			
INMATE GRIEVANCE PROGRAM CENTRAL OFFICE REVIEW COMMITTEE	Title of Grievance Cell Lights		

GRIEVANT'S REQUEST UNANIMOUSLY DENIED FOR MOOTNESS

Upon full hearing of the facts and circumstances in the instant case, the grievant's action requested is hereby denied, as CORC considers the issue moot.

CORC notes that Directive #4040, § 701.3 requires that "An inmate must be personally affected by the policy or issue he or she is grieving, or must show that he or she will be personally affected by that policy or issue unless some relief is granted or changes made."

CORC notes that the grievant was transferred on 2/28/20. Due to this change in circumstances, the grievant is no longer personally affected by the issues raised in the instant complaint.

Accordingly, the matter is now closed.

SMM/

Exhibit

E

NEW YORK STATE
DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
THE HARRIMAN STATE CAMPUS - BUILDING 2
1220 WASHINGTON AVENUE
ALBANY, N.Y. 12226-2050

ANTHONY J. ANNUCCI
ACTING COMMISSIONER

JAMES O'GORMAN
DEPUTY COMMISSIONER
CORRECTIONAL FACILITIES

REVIEW OF SUPERINTENDENT'S HEARING

NAME: BURRELL, AKO

NO. 17B2994

HEARING FACILITY: ATTICA

ON BEHALF OF THE COMMISSIONER AND IN RESPONSE TO YOUR RECENT
LETTER OF APPEAL, PLEASE BE ADVISED THAT YOUR SUPERINTENDENT'S HEARING OF
OCTOBER 18, 2019, HAS BEEN REVIEWED AND REVERSED ON OCTOBER 24, 2019.

D. VENETTOZZI
DIRECTOR, SPECIAL HOUSING/
INMATE DISCIPLINARY PROGRAM

CC: FACILITY SUPERINTENDENT
CENTRAL OFFICE FILES

APPEAL DECISION RENDERED PURSUANT TO SECTION 254.8 OF CHAPTER V AND
ELECTRONICALLY PRODUCED UPON THE AUTHORITY OF THE DIRECTOR OF SPECIAL
HOUSING/INMATE DISCIPLINE PROGRAM.

NEW YORK STATE
DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
THE HARRIMAN STATE CAMPUS - BUILDING 2
1220 WASHINGTON AVENUE
ALBANY, N.Y. 12226-2050

ANTHONY J. ANNUCCI
ACTING COMMISSIONER

JAMES O'GORMAN
DEPUTY COMMISSIONER
CORRECTIONAL FACILITIES

M E M O R A N D U M

TO: SUPERINTENDENT JOSEPH H NOETH
ATTICA CORRECTIONAL FACILITY

FROM: DONALD VENETTOZZI, DIRECTOR
SPECIAL HOUSING/INMATE DISCIPLINE

DATE: OCTOBER 24, 2019

RE: REVERSAL OF SUPERINTENDENT'S HEARING/EXPUNCTION ORDER

<u>INMATE/NUMBER</u>	<u>DATE OF HEARING</u>	<u>DATE OF INCIDENT</u>
BURRELL, AKA #17B2994	OCTOBER 18, 2019 BY AISP MCCULLOCH, T @ ATTICA C.F. TAPE #: 19-1915	SEPTEMBER 25, 2019

THE ABOVE-NOTED SUPERINTENDENT'S HEARING HAS BEEN REVERSED ON
OCTOBER 24, 2019, FOR THE FOLLOWING REASON(S):

HEARING OFFICER INAPPROPRIATELY DENIED REQUESTED INMATE WITNESS
WHO MAY HAVE PROVIDED RELEVANT TESTIMONY.

RECORDS CONTAINING REFERENCES TO THE ABOVE-NOTED SUPERINTENDENT'S
HEARING ARE TO BE EXPUNGED.

PLEASE OBTAIN ALL AVAILABLE RECORDS WITHIN 14 DAYS OF RECEIPT OF THIS
MEMORANDUM. AFTER ACCUMULATING SUCH RECORDS, PLEASE FORWARD THEM FOLLOWING
ESTABLISHED PROCEDURES.

DO NOT SEND TAPES - RETAIN ON FILE AND MARK AS EXPUNGED.

IF THE RECORDS ARE NOT AVAILABLE AT YOUR FACILITY, PLEASE ADVISE THIS
OFFICE AS SOON AS POSSIBLE.

CC: I.R.C., ATTICA C.F.
EXPUNGEMENT FILE

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

WITNESS INTERVIEW NOTICE (For Superintendent's & Disciplinary Hearings)Atica

Correctional Facility

Burrell

Inmate Name (Print)

17B2994

DIN

An inmate may call witnesses on his or her behalf provided their testimony is material, is not redundant, and doing so does not jeopardize institutional safety or correctional goals.

If permission to call a witness is denied, or of a requested witness testifies outside the presence of the inmate charged and/or if the inmate is not permitted to review the testimony of a witness, the reason for such determination must be recorded on this form and copies given to the inmate by the hearing officer and included in the hearing record.

Reference: Directive #4932, Sections 253.5 and 254.5.

Presley 14B1539

Requested witness:

- ☒ Permission to call the requested witness is denied.
☐ Requested witness will testify outside inmate's presence.
☐ Inmate is not permitted to review requested witness's testimony.

Date: 10-18-19

Explanation:

Denied Due To Requested witness being involved in this incident and its violent nature and to ensure the safety of staff and inmates and to ensure the security of this facility. Also, this inmates testimony would be redundant to testimony requested of Sgt Baker, the report and memorandum written, the injury report from the facility hospital and the requested video.

Requested witness:

- ☐ Permission to call the requested witness is denied.
☐ Requested witness will testify outside inmate's presence.
☐ Inmate is not permitted to review requested witness's testimony.

Date: _____

Explanation: _____

Requested witness:

- ☐ Permission to call the requested witness is denied.
☐ Requested witness will testify outside inmate's presence.
☐ Inmate is not permitted to review requested witness's testimony.

Date: _____

Explanation: _____

Signature

Hearing Officer

Inmate

DIN

Date Received

Exhibit

F


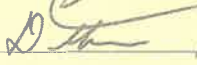
FORM 2171B (10/14)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

Side 2

Correctional Facility

INMATE MISBEHAVIOR REPORT ♦ INFORME DE MAL COMPORTAMIENTO DEL RECLUSO

1. NAME OF INMATE (Last, First) ♦ NOMBRE DEL RECLUSO (Apellido, Nombre) BURRELL		NO. ♦ NÚM. 1732994	HOUSING LOCATION ♦ CELDA C E-14
2. LOCATION OF INCIDENT ♦ LUGAR DEL INCIDENTE RECEPTION BUILDING 3RD FLOOR EAST GALLERY		INCIDENT DATE ♦ FECHA 10-30-19	INCIDENT TIME ♦ HORA APPROXIMATELY 8:10 PM
3. RULE VIOLATION(S) ♦ VIOLACIÓN/ES 104.13 CREAT DISTURBANCE 102.10 INTERFERENCE 107.20 FALSE INFORMATION			
4. DESCRIPTION OF INCIDENT ♦ DESCRIPCIÓN DEL INCIDENTE ON THE ABOVE DATE AND APPROXIMATE TIME WHILE CONDUCTING A SECURITY PATROL ON THE EAST GALLERY, RECEPTION BUILDING 3RD FLOOR I (C. LEE WAS STOPPED BY INMATE BURRELL 1732994 WHO LOCKED IN C E 14 CELL. INMATE BURRELL TOLD ME HE WAS HAVING CHEST PAINS. I REPORTED THIS TO THE HALL CATCHER AND HE CALLED MEDICAL. WHEN THE NURSE CAME TO SEE INMATE BURRELL MYSELF AND C.O. URBAN WENT TO GET HIM FROM HIS CELL TO BE EXAMINED BY THE NURSE. INMATE BURRELL TOLD US HE NEVER SAID HE HAD CHEST PAINS AND REFUSED TO EXIT HIS CELL TO BE SEEN BY THE MEDICAL STAFF. INMATE BURRELL'S FALSE STATEMENTS INTERFERED WITH THE SECURITY PATROL AND DISTURBED THE OPERATION OF THE MEDICAL STAFF. AREA SUPERVISOR WAS NOTIFIED, NO FURTHER INCIDENT TO REPORT AT THIS TIME			
REPORT DATE ♦ FECHA 10.30.19	REPORTED BY ♦ NOMBRE DE LA PERSONA QUE HACE EL INFORME M. LEE CC.	SIGNATURE ♦ FIRMA 	TITLE ♦ TÍTULO C.O.
5. ENDORSEMENTS OF OTHER EMPLOYEE WITNESSES (if any) ENDOSOS DE OTROS EMPLEADOS TESTIGOS (si hay)		SIGNATURES: FIRMAS: 1.  D. Urban 2. _____ 3. _____	

NOTE: Fold back Page 2 on dotted line before completing below.

DATE AND TIME SERVED UPON INMATE **OCT 31 2019 1100am** NAME AND TITLE OF SERVER **C.O. J. Vorholzer jny**
 FECHA HORA DADO AL RECLUSO _____ NOMBRE Y TÍTULO DEL QUE ENTREGA _____

You are hereby advised that no statement made by you in response to the charges or information derived therefrom may be used against you in a criminal proceeding. ♦ Por este medio se le informa que no se puede usar ninguna declaración hecha por usted como respuesta al cargo o la información derivada de ella en una demanda criminal.

NOTICE ♦ AVISO

REVIEWING OFFICER (DETACH BELOW FOR VIOLATION HEARING ONLY)

You are hereby notified that the above report is a formal charge and will be considered and determined at a hearing to be held. ♦ Por este medio se le notifica que el informe anterior es un cargo formal el cual se considerará y determinará en una audiencia a celebrarse.

The inmate shall be permitted to call witnesses provided that so doing does not jeopardize institutional safety or correctional goals. ♦ Se le permitirá al recluso llamar testigos con tal de que al hacerlo no pondrá en peligro la seguridad de la institución o los objetivos del Departamento.

If restricted pending a hearing for this misbehavior report, you may write to the Deputy Superintendent for Security or his/her designee prior to the hearing to make a statement on the need for continued prehearing confinement. ♦ Si está restringido pendiente a una audiencia por este informe de mal comportamiento, puede escribirle al Diputado del Superintendente para Seguridad o su representante antes de la audiencia para que haga una declaración acerca de la necesidad de continuar bajo confinamiento, previo a la audiencia.

Exhibit

G

FORM 2187 (3/17)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
ATTICA Correctional Facility

DEPRIVATION ORDER

INMATES NAME: Burrell DIN: 17B2994 CELL LOCATION: RB-CE-14In accordance with 7 NYCRR Section 305.2, on this date of 10/22/2019 you are being deprived of the following specific item(s), privilege(s) or service(s): Shower

because it is determined that a threat to the safety or security of staff, inmates, or State property exists and for the following specific reason(s):

On 10/22/19 during the shower program, you did not follow shower procedures causing a U.O.F.(19-0158)

Recommended by: [Signature], SergeantAuthorized by: Alex R. [Signature], Date: 10/22/19

Daily Review	Date	Cell #	Reason(s) for continuing this order (based on current evaluation)
DAY 2	10/24	CE-14	Refused to follow SHU shower policy resulting in this order
			Recommended by (Sgt): <u>[Signature]</u> Authorized by: <u>[Signature]</u>
DAY 3	10/25		Refused to follow SHU shower policy resulting in this order
			Recommended by (Sgt): <u>R. Fox</u> Authorized by: <u>[Signature]</u>
DAY 4	10/29		Refused to follow SHU shower policy resulting in this order
			Recommended by (Sgt): <u>R. Fox</u> Authorized by: <u>[Signature]</u>
DAY 5	10/31		Refused to follow SHU shower policy resulting in this order
			Recommended by (Sgt): <u>T. [Signature]</u> Authorized by: <u>Alex R. [Signature]</u>
DAY 6	11/2		Refused to follow SHU shower policy resulting in this order
			Recommended by (Sgt): <u>[Signature]</u> Authorized by: <u>[Signature]</u>
DAY 7	11/5		Refused to follow SHU shower policy, delaying the shower program
			Recommended by (Sgt): <u>R. Fox</u> Authorized by: <u>[Signature]</u>

After seven (7) days, deprivation orders will be reviewed and can be renewed by the Superintendent.

SUPERINTENDENTS REVIEW:

COMMENTS:

RENEW: ☐ YES ☒ NOSIGNATURE: [Signature]DATE: 11/6/19

NOTICE TO INMATE:

You may write the Deputy Superintendent for Security or his designee to make a statement on the need for continuing this deprivation order.

Notes: Upon signature (authorization) copy and deliver to the inmate.

For any deprivation order issued pursuant to § 305.2(e), the appropriate OMH form must be attached as soon as possible upon completion by the approving clinical professional

CELL SHIELD ORDER - SHU

Attica Correctional Facility

INMATE'S NAME	DIN	CELL LOCATION
Burrell	17B2994	CE-14

In accordance with 7 NYCRR Section 305.6, you are being placed under a cell shield order

from 10/30/2019 to 11/1/2019
(starting date) (ending date)

for the following reason(s):

On 10/30/19 you refused to return feed-up items consisting of 2 cups, spork and cereal container.

Notice:

You may write to the Deputy Superintendent for Security or his or her designee to make a statement on the need for continuing this cell shield order.

Recommended by: R. Fox 7 21, Sergeant

Authorized by: A. (DSS) R. [signature] 10-30-19
DSS, OD or Higher Ranking Authority Date

Dist: Original - Superintendent

Copy - Inmate

Copy - SHU Sergeant

FORM 2188 R (3/17)

CELL SHIELD ORDER - SHU - RENEWAL

Attica Correctional Facility

INMATE'S NAME	DIN	CELL LOCATION
Burrell	17B2994	CE-14

In accordance with 7 NYCRR Section 305.6, you were placed under a cell shield order
on 10/30/2019
(original order date)

This order has been reevaluated and a decision has been made to renew the order
from 11/8/2019 to 11/15/2019
(starting date) (ending date)

for the following reason(s):

On 10/30/19 you refused to return feed-up items consisting of 2 cups, spork and cereal container.

Notice:

You may write to the Deputy Superintendent for Security or his or
her designee to make a statement on the need for continuing this
cell shield order.

Recommended by: AMasillo, Sergeant

Authorized by: DISCONTINUE 11/8/19 Superintendent/OD Date

Dist: Original - Superintendent

Copy - Inmate

Copy - SHU Sergeant

FORM 2188 R (3/17)

CELL SHIELD ORDER - SHU - RENEWAL

Attica Correctional Facility

INMATE'S NAME	DIN	CELL LOCATION
Burrell	17B2994	CE-14

In accordance with 7 NYCRR Section 305.6, you were placed under a cell shield order
on 10/30/2019
(original order date)

This order has been reevaluated and a decision has been made to renew the order
from 11/1/2019 to 11/8/2019
(starting date) (ending date)

for the following reason(s):

On 10/30/19 you refused to return feed-up items consisting of 2 cups, spork and cereal container.

Notice:

You may write to the Deputy Superintendent for Security or his or
her designee to make a statement on the need for continuing this
cell shield order.

Recommended by: R. Fox 771, Sergeant

Authorized by: A. Cella Acty Supt 11/8/19
Superintendent/OD Date

Dist: Original - Superintendent
Copy - Inmate
Copy - SHU Sergeant

Exhibit

H

FORM #2077 (REV. 11/16)

NEW YORK STATE DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

CELL FRISK/CONTRABAND RECEIPT

Original - Inmate
Copy - DSS

CORRECTIONAL FACILITY

Date: 10-30-19 Frisk Start Time: 1:15 pm Frisk End Time: 1:25 pm
 Inmate Name: BURRILL DIN: 17132994 CELL/CUBE/ROOM: C-E-14
 Officer Conducting Search: McLGE 5723
 Print Name Legibly Badge # Signature

ITEMS CONFISCATED OR DAMAGED	WHERE FOUND	DISPOSITION OF ITEMS LISTED
2 ceps	CN LODGE	DISPOSED
1 Low SLASH SW	INTACT	IN
1 Corral Contraband	INTACT	INTACT
& Spunk		

YES NO CONTRABAND FOUNDNO NO PROPERTY DAMAGED DURING SEARCH

NOTICE TO INMATE: YOU MAY WRITE TO THE DEPUTY SUPERINTENDENT FOR SECURITY WITHIN 7 DAYS OF THIS RECEIPT REGARDING THE CONFISCATION OR DISPOSITION OF THESE ITEMS.

NOTE: DURING THIS CELL FRISK, MY INITIALS BELOW INDICATE THAT THE CELL INTEGRITY CHECK HAS BEEN COMPLETED AS FOLLOWS:

FLOORS: Q SINK/TOILET: Q
 AIR VENT: Q WINDOW CHECKED/INTACT: INT
 CEILING: Q WALLS: Q
 BARS: Q MISC: Q

IN ADDITION: THE FOLLOWING ITEMS WERE CHECKED FOR COMPLIANCE:

PROPERTY LIMITS (No more than 4 bags of property): Q

PHOTOGRAPH/PICTURE COMPLIANCE (No nudes visible from the front of cell. All photos/pictures confined in the appropriate 2' x 4' section.) Q

INMATE ID MATCHES CURRENT APPEARANCE (Checked ID to inmate's current appearance, if the inmate was present for the search.) Q

Comments: _____

FORM #2077 (REV. 11/16)

NEW YORK STATE DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

CELL FRISK/CONTRABAND RECEIPT

Original - Inmate
Copy - DSSATTICA

CORRECTIONAL FACILITY

Date: 11-1-19 Frisk Start Time: 1133 AM Frisk End Time: 1135 AMInmate Name: Burrell DIN: 1782994 CELL/CUBE/ROOM: CE-11Officer Conducting Search: B. Rose 32068 B. to
Print Name Legibly Badge # Signature

ITEMS CONFISCATED OR DAMAGED

WHERE FOUND

DISPOSITION OF ITEMS LISTED

<u>Long Sleeve</u> <u>STATE GREEN SHIRT</u>	<u>IN CEN</u>	<u>DISPOSED</u>

____ NO CONTRABAND FOUND

____ NO PROPERTY DAMAGED DURING SEARCH

NOTICE TO INMATE: YOU MAY WRITE TO THE DEPUTY SUPERINTENDENT FOR SECURITY WITHIN 7 DAYS OF THIS RECEIPT REGARDING THE CONFISCATION OR DISPOSITION OF THESE ITEMS.**NOTE:** DURING THIS CELL FRISK, MY INITIALS BELOW INDICATE THAT THE CELL INTEGRITY CHECK HAS BEEN COMPLETED AS FOLLOWS:FLOORS: BRSINK/TOILET: BRAIR VENT: BRWINDOW CHECKED/INTACT: BRCEILING: BRWALLS: BRBARS: BRMISC: BR

IN ADDITION: THE FOLLOWING ITEMS WERE CHECKED FOR COMPLIANCE:

PROPERTY LIMITS (No more than 4 bags of property): BRPHOTOGRAPH/PICTURE COMPLIANCE (No nudes visible from the front of cell. All photos/pictures confined in the appropriate 2' x 4' section.) BRINMATE ID MATCHES CURRENT APPEARANCE (Checked ID to inmate's current appearance, if the inmate was present for the search.) BR

Comments: _____

M 2171B (10/14)

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

III

Attic 9

Correctional Facility

INMATE MISBEHAVIOR REPORT ♦ INFORME DE MAL COMPORTAMIENTO DEL RECLUSO

1. NAME OF INMATE (Last, First) ♦ NOMBRE DEL RECLUSO (Apellido, Nombre) Burrell	NO. ♦ NÚM. 17B2994	HOUSING LOCATION ♦ CELDA CE-14
2. LOCATION OF INCIDENT ♦ LUGAR DEL INCIDENTE C - East Gallery	INCIDENT DATE ♦ FECHA 10-22-19	INCIDENT TIME ♦ HORA 4:22 pm
3. RULE VIOLATION(S) ♦ VIOLACIONES (106.10) Direct order (104.11) Violent Conduct (104.13) Create Disturbance		
4. DESCRIPTION OF INCIDENT ♦ DESCRIPCIÓN DEL INCIDENTE On the above date and approximate time, I (CO Skoczylas and CO Perdek) were escorting inmate Burrell 17B2994 back to his cell from the shower. Inmate Burrell was given an order to keep his head straight. He refused to comply with the order and violently turned toward CO Perdek creating a disturbance on the gallery. Inmate Burrell was then forced against the wall by CO Perdek and myself. Inmate Burrell was then escorted off the gallery and into the risk room to be seen by medical with no further incident.		
REPORT DATE ♦ FECHA 10-22-19		
REPORTED BY ♦ NOMBRE DE LA PERSONA QUE HACE EL INFORME Skoczylas		SIGNATURE ♦ FIRMA [Signature]
TITLE ♦ TÍTULO CO		
5. ENDORSEMENTS OF OTHER EMPLOYEE WITNESSES (if any) SIGNATURES: ENDOSOS DE OTROS EMPLEADOS TESTIGOS (si hay) FIRMAS: 1. [Signature] CO. 2. _____ 3. _____		

NOTE: Fold back Page 2 on dotted line before completing below.

DATE AND TIME SERVED UPON INMATE OCT 24 2019

NAME AND TITLE OF SERVER

FECHA HORA DADO AL RECLUSO

NOMBRE Y TÍTULO DEL QUE ENTREGA

You are hereby advised that no statement made by you in response to the charges or information derived therefrom may be used against you in a criminal proceeding. ♦ Por este medio se le informa que no se puede usar ninguna declaración hecha por usted como respuesta al cargo o la información derivada de ella en una demanda criminal.

NOTICE ♦ AVISO

REVIEWING OFFICER (DETACH BELOW FOR VIOLATION HEARING ONLY)

You are hereby notified that the above report is a formal charge and will be considered and determined at a hearing to be held. ♦ Por este medio se le notifica que el informe anterior es un cargo formal el cual se considerará y determinará en una audiencia a celebrarse.

The inmate shall be permitted to call witnesses provided that so doing does not jeopardize institutional safety or correctional goals. ♦ Se le permitirá al recluso llamar testigos con tal de que al hacerlo no pondrá en peligro la seguridad de la institución o los objetivos del Departamento.

If restricted pending a hearing for this misbehavior report, you may write to the Deputy Superintendent for Security or his/her designee prior to the hearing to make a statement on the need for continued prehearing confinement. ♦ Si está restringido pendiente a una audiencia por este informe de mal comportamiento, puede escribirle al Diputado del Superintendente para Seguridad o su representante antes de la audiencia para que haga una declaración acerca de la necesidad de continuar bajo confinamiento, previo a la audiencia.

Exhibit

I



Corrections and Community Supervision

ANDREW M. CUOMO
Governor

ANTHONY J. ANNUCCI
Acting Commissioner

MEMORANDUM

TO: **Burrell, Ako, 17B2994 (29-05)**

FROM: CAPTAIN R. MITCHELL *R. Mitchell*

DATE: January 9, 2020

RE: EXPUNGEMENT OF A TIER III HEARING

Per Mr. D. Venettozzi, Director of Special Housing/Inmate Disciplinary Program, your Tier III hearing held on OCTOBER 30, 2019 by CAPT D. HODGES at Attica Correctional Facility has been reviewed and reversed.

All references will be removed from your record.

RM/cq

- c. Deputy Superintendent for Security
 - Inmate Records
 - Block Hall Captain
 - Program Office
 - PK Office
 - Commissary*
 - Package Room*
 - Visiting Room*
 - Front Gate*

* Copy only if it pertains to that specific area

NEW YORK STATE
DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
THE HARRIMAN STATE CAMPUS - BUILDING 2
1220 WASHINGTON AVENUE
ALBANY, N.Y. 12226-2050

ANTHONY J. ANNUCCI
ACTING COMMISSIONER

JAMES O'GORMAN
DEPUTY COMMISSIONER
CORRECTIONAL FACILITIES

REVIEW OF SUPERINTENDENT'S HEARING

NAME: BURRELL, AKO

NO. 17B2994

HEARING FACILITY: ATTICA

ON BEHALF OF THE COMMISSIONER AND IN RESPONSE TO YOUR RECENT
LETTER OF APPEAL, PLEASE BE ADVISED THAT YOUR SUPERINTENDENT'S HEARING OF
OCTOBER 30, 2019, HAS BEEN REVIEWED AND REVERSED ON JANUARY 7, 2020.

D. VENETTOZZI
DIRECTOR, SPECIAL HOUSING/
INMATE DISCIPLINARY PROGRAM

CC: FACILITY SUPERINTENDENT
CENTRAL OFFICE FILES

APPEAL DECISION RENDERED PURSUANT TO SECTION 254.8 OF CHAPTER V AND
ELECTRONICALLY PRODUCED UPON THE AUTHORITY OF THE DIRECTOR OF SPECIAL
HOUSING/INMATE DISCIPLINE PROGRAM.

EXHIBIT J

12/04/19

SDCP007

DISCIPLINARY SYSTEM
ATTICA GENERAL

FPMS

PAGE 001

INMATE CURRENT SANCTIONS

17B2994

BURRELL, AKO

LOCATION: RB-CE-014

PENALTY -----	LENGTH -----	START -----	RELEASE -----
SPECIAL HOUSING UNIT	0 45	10/30/19	12/14/19
KEEPLOCK	0 20	12/14/19	1/03/20
KEEPLOCK	0 10	1/03/20	1/13/20
LOSS OF PACKAGES	0 20	3/06/20	3/26/20
LOSS OF PACKAGES	0 45	3/26/20	5/10/20
LOSS OF PACKAGES	0 10	5/10/20	5/20/20
LOSS OF COMMISSARY	0 20	3/06/20	3/26/20
LOSS OF COMMISSARY	0 45	3/26/20	5/10/20
LOSS OF COMMISSARY	0 10	5/10/20	5/20/20
LOSS OF PHONE	0 20	3/06/20	3/26/20
LOSS OF PHONE	0 45	3/26/20	5/10/20
LOSS OF PHONE	0 10	5/10/20	5/20/20

SUCCESSFUL PRINT COMPLETION

22 CV 506 ✓

JS 44 (Rev. 10/20)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

Ako K. Burrell #17B2994

(b) County of Residence of First Listed Plaintiff Franklin
(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

Pro Se

DEFENDANTS

Joseph Noeth, Superintendent of ACIF

County of Residence of First Listed Defendant
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff ☒ 3 Federal Question (U.S. Government Not a Party)
- ☐ 2 U.S. Government Defendant ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | | | | | |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| | PTF | DEF | | PTF | DEF |
| Citizen of This State | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

Click here for: Nature of Suit Code Descriptions.

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act IMMIGRATION <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark <input type="checkbox"/> 880 Defend Trade Secrets Act of 2016 SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit (15 USC 1681 or 1692) <input type="checkbox"/> 485 Telephone Consumer Protection Act <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	PRISONER PETITIONS Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input checked="" type="checkbox"/> 530 General Other: <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement		

V. ORIGIN (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding ☐ 2 Removed from State Court ☐ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened ☐ 5 Transferred from Another District (specify) ☐ 6 Multidistrict Litigation - Transfer ☐ 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

Brief description of cause:

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$

CHECK YES only if demanded in complaint:

JURY DEMAND: ☐ Yes ☐ No

VIII. RELATED CASE(S) IF ANY

(See instructions):

JUDGE

DOCKET NUMBER

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE

Upstate Correctional Facility
P.O. Box 2000
309 Bare Hill Road
Malone, NY 12953

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Southern District of New York
4 States Courthouse
Court Street
410, NY 14202

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